

County: Dodge
HILLSIDE MANOR
803 SOUTH UNIVERSITY AVENUE

Facility ID: 1460

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BEAVER DAM 53916 Phone:(920) 887-5901

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? Yes

Number of Beds Set Up and Staffed (12/31/02): 123

Total Licensed Bed Capacity (12/31/02): 123

Number of Residents on 12/31/02: 120

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Non-Profit Corporation

Skilled

No

Yes

Yes

122

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%	

Home Health Care	No	Primary Diagnosis		%	Age Groups		%	Less Than 1 Year	38.3
Supp. Home Care-Personal Care	No	-----			-----			1 - 4 Years	47.5
Supp. Home Care-Household Services	No	Developmental Disabilities		0.0	Under 65		5.0	More Than 4 Years	14.2
Day Services	No	Mental Illness (Org./Psy)		24.2	65 - 74		3.3		-----
Respite Care	No	Mental Illness (Other)		2.5	75 - 84		35.8		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse		0.0	85 - 94		43.3	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic		3.3	95 & Over		12.5	Full-Time Equivalent	
Congregate Meals	No	Cancer		3.3	-----			Nursing Staff per 100 Residents	
Home Delivered Meals	No	Fractures		0.0			100.0	(12/31/02)	
Other Meals	No	Cardiovascular		7.5	65 & Over		95.0	-----	
Transportation	No	Cerebrovascular		18.3	-----			RNs	13.9
Referral Service	No	Diabetes		4.2	Sex		%	LPNs	16.8
Other Services	No	Respiratory		6.7	-----			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions		30.0	Male		27.5	Aides, & Orderlies	
Mentally Ill	No			-----	Female		72.5		
Provide Day Programming for				100.0			-----		
Developmentally Disabled	No						100.0		

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
Level of Care			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	2	100.0	283		68	89.5	114		0	0.0	0	42	100.0	166		0	0.0	0	0.0	0	112	93.3
Intermediate	---	---	---		8	10.5	95		0	0.0	0	0	0.0	0		0	0.0	0	0.0	0	8	6.7
Limited Care	---	---	---		0	0.0	0		0	0.0	0	0	0.0	0		0	0.0	0	0.0	0	0	0.0
Personal Care	---	---	---		0	0.0	0		0	0.0	0	0	0.0	0		0	0.0	0	0.0	0	0	0.0
Residential Care	---	---	---		0	0.0	0		0	0.0	0	0	0.0	0		0	0.0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---		0	0.0	0		0	0.0	0	0	0.0	0		0	0.0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0		0	0.0	0		0	0.0	0	0	0.0	0		0	0.0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0		0	0.0	0		0	0.0	0	0	0.0	0		0	0.0	0	0.0	0	0	0.0
Total	2	100.0			76	100.0			0	0.0		42	100.0			0	0.0		0.0		120	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02				

Percent Admissions from:		% Needing			Total	
		Activities of	%	Assistance of	% Totally	Number of
Private Home/No Home Health	6.4	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	3.8	Bathing	0.0	85.8	14.2	120
Other Nursing Homes	21.0	Dressing	0.8	90.0	9.2	120
Acute Care Hospitals	62.4	Transferring	9.2	80.0	10.8	120
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	7.5	80.0	12.5	120
Rehabilitation Hospitals	0.0	Eating	56.7	35.8	7.5	120
Other Locations	6.4	*****				
Total Number of Admissions	157	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	8.3		Receiving Respiratory Care	15.0
Private Home/No Home Health	19.5	Occ/Freq. Incontinent of Bladder	55.8		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	25.2	Occ/Freq. Incontinent of Bowel	20.8		Receiving Suctioning	0.0
Other Nursing Homes	0.6				Receiving Ostomy Care	0.8
Acute Care Hospitals	2.5	Mobility			Receiving Tube Feeding	3.3
Psych. Hosp.-MR/DD Facilities	0.6	Physically Restrained	4.2		Receiving Mechanically Altered Diets	17.5
Rehabilitation Hospitals	0.0					
Other Locations	8.2	Skin Care			Other Resident Characteristics	
Deaths	43.4	With Pressure Sores	5.0		Have Advance Directives	80.8
Total Number of Discharges		With Rashes	12.5		Medications	
(Including Deaths)	159				Receiving Psychoactive Drugs	61.7

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	99.2	87.4	1.13	85.1	1.17
Current Residents from In-County	95.8	84.3	1.14	76.6	1.25
Admissions from In-County, Still Residing	26.1	15.2	1.72	20.3	1.29
Admissions/Average Daily Census	128.7	213.3	0.60	133.4	0.97
Discharges/Average Daily Census	130.3	214.2	0.61	135.3	0.96
Discharges To Private Residence/Average Daily Census	58.2	112.9	0.52	56.6	1.03
Residents Receiving Skilled Care	93.3	91.1	1.02	86.3	1.08
Residents Aged 65 and Older	95.0	91.8	1.03	87.7	1.08
Title 19 (Medicaid) Funded Residents	63.3	65.1	0.97	67.5	0.94
Private Pay Funded Residents	35.0	22.6	1.55	21.0	1.66
Developmentally Disabled Residents	0.0	1.5	0.00	7.1	0.00
Mentally Ill Residents	26.7	31.3	0.85	33.3	0.80
General Medical Service Residents	30.0	21.8	1.38	20.5	1.46
Impaired ADL (Mean)*	48.2	48.9	0.98	49.3	0.98
Psychological Problems	61.7	51.6	1.19	54.0	1.14
Nursing Care Required (Mean)*	6.8	7.4	0.91	7.2	0.94